

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD	04153	3-27-00
O.I.P.E. CLASSIFIER			5/16/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
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42	✓ > ✓
43	✓ ✓
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45	✓ ✓
46	✓ ✓ ✓
47	✓
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Claim	Date
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BEST AVAILABLE

If more than 150 claims or 10 actions  
staple additional sheet here

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